Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
MIDDLE DISTRICT OF NORTH CAROLINA		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	☐ Check if this is amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	't 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your	e the name that is on government-issued ire identification (for	Channel First name	First name
		nple, your driver's use or passport).	Rene Middle name	Middle name
	iden	g your picture tification to your ting with the trustee.	Chance Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
	mee	ung wun me nustee.		
2.		other names you have d in the last 8 years		
		de your married or den names.		
3.	you num Indi	the last 4 digits of r Social Security ber or federal vidual Taxpayer tification number	xxx-xx-3757	

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Debtor 1	Channel Rene Chance	
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Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EIN	☐ I have not used any business name or EINs. Business name(s) EIN
5.	Where you live	1914 Jersey Avenue, Apt 5	If Debtor 2 lives at a different address:
		Durham, NC 27707 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Durham County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Deb	tor 1 Channel Rene Cha	ance			Case number (if known)		
Par	t 2: Tell the Court About	Your Bankruptcy C	ase				
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	☐ Chapter 7					
		☐ Chapter 11					
		☐ Chapter 12					
		Chapter 13					
8.	How you will pay the fee	☐ I will pay th	e entire fee wher	n I file my petition. Please check	c with the clerk's office in your local court fo	or more details	
			r attorney is subm		urself, you may pay with cash, cashier's chalf, your attorney may pay with a credit card		
					n, sign and attach the Application for Indivi	iduals to Pay	
		•		(Official Form 103A).	only if you are filing for Chapter 7. By law	a judge may	
		but is not re applies to y	quired to, waive your family size and	our fee, and may do so only if you I you are unable to pay the fee in	ur income is less than 150% of the official p installments). If you choose this option, yo ial Form 103B) and file it with your petition.	poverty line that bu must fill out	
9.	Have you filed for	■ No.					
	bankruptcy within the last 8 years?	☐ Yes.					
	and by your by	District		When	Case number		
		Distric		When			
		Distric		When	Case number		
10.	Are any bankruptcy cases pending or being	■ No					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
		Debtor			Relationship to you		
		Distric		When	Case number, if known		
		Debtor			Relationship to you		
		Distric		When	Case number, if known		
11.	Do you rent your residence?	□ No. Go to	line 12.				
		■ Yes. Has y	our landlord obtain	ned an eviction judgment against	t you?		
			No. Go to line 12	2.			
			Yes. Fill out <i>Initi</i> bankruptcy petit		ludgment Against You (Form 101A) and file	it with this	

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Deb	tor 1 Channel Rene Ch	ance		Case number (if known)
Par	Report About Any Bu	ısinesses	You Own as a Sole Proprie	etor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of bu	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	′
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, Sta	ate & ZIP Code
	it to this petition.		Check the appropriate b	ox to describe your business:
			☐ Health Care Bus	iness (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Rea	al Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (as	defined in 11 U.S.C. § 101(53A))
			☐ Commodity Brok	er (as defined in 11 U.S.C. § 101(6))
			☐ None of the abov	ve
	For a definition of small	■ No.	I am not filing under Cha	pter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.		r 11, I am a small business debtor according to the definition in the Bankruptcy Code, and ed under Subchapter V of Chapter 11.
		☐ Yes.		r 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I r Subchapter V of Chapter 11.
Par	t 4: Report if You Own or	Have Any	/ Hazardous Property or A	ny Property That Needs Immediate Attention
14.	Do you own or have any property that poses or is	■ No.		
	alleged to pose a threat	☐ Yes.		
	of imminent and identifiable hazard to public health or safety?		What is the hazard?	
	Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
				Number, Street, City, State & Zip Code

Debtor 1 Channel Rene Chance

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Channel Rene Ch	ance		Case number (ii	f known)		
Part	t 6: Answer These Ques	tions for Re	porting Purposes				
	What kind of debts do you have?	16a.			d in 11 U.S.C. § 101(8) as "incurred by an		
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.	Are your debts primarily busine money for a business or investmen				
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you owe th	at are not consumer debts or business d	debts		
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7. Go	o to line 18.			
	Do you estimate that after any exempt property is excluded and	☐ Yes.		u estimate that after any exempt property e to distribute to unsecured creditors?	y is excluded and administrative expenses		
	administrative expenses		□ No				
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes				
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-19 □ 200-99		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000		
19.	How much do you estimate your assets to be worth?	□ \$100,0	50,000 11 - \$100,000 101 - \$500,000 101 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion		
20.	How much do you estimate your liabilities to be?	\$100,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
Part	7: Sign Below						
For	you	I have exa	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.				
li c		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.					
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.				
		bankrupto and 3571	y case can result in fines up to \$25	realing property, or obtaining money or p 50,000, or imprisonment for up to 20 year	roperty by fraud in connection with a rs, or both. 18 U.S.C. §§ 152, 1341, 1519,		
		Channe	Rene Chance of Debtor 1	Signature of Debtor 2			
		Executed	on June 10, 2020 MM / DD / YYYY	Executed on MM / D	DD / YYYY		

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Debtor 1	Channel Rene Chance	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Koury Hicks	Date	June 10, 2020				
Signature of Attorney for Debtor		MM / DD / YYYY				
Koury Hicks Printed name						
The Law Offices of John T. Orcutt, PC						
6616-203 Six Forks Road Raleigh, NC 27615						
Number, Street, City, State & ZIP Code						
Contact phone 919-286-1695	Email address	khicks@johnorcutt.com				
36204 NC						

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Fill	in this inform	ation to identify your	case:			
	otor 1	Channel Rene Ch				
		First Name	Middle Name	Last Name		
	otor 2 use if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ban	kruptcy Court for the:	MIDDLE DISTRICT OF	NORTH CAROLINA		
		, ,				
	se number nown)				_	k if this is an ded filing
						Ç
∩f	ficial For	m 106Sum				
			and Liabilities ar	nd Certain Statistical Information		12/15
info	rmation. Fill o	ut all of your schedule	es first; then complete th	are filing together, both are equally responsible f e information on this form. If you are filing amend the box at the top of this page.		
Par	t 1: Summa	rize Your Assets				
					Your a	ssets of what you own
1.	Schedule A/I	B: Property (Official Fo	orm 106A/B) rom Schedule A/B		\$	0.00
					\$	11,088.50
	1c. Copy line	63, Total of all property	on Schedule A/B		\$	11,088.50
Par	t 2: Summa	rize Your Liabilities				
	<u> </u>				Varia li	iobilitioo
						i abilities nt you owe
2.			laims Secured by Property mn A, <i>Amount of claim</i> , at	(Official Form 106D) the bottom of the last page of Part 1 of Schedule D	\$	9,879.00
3.			Unsecured Claims (Officia 1 (priority unsecured claim	l Form 106E/F) s) from line 6e of <i>Schedule E/F</i>	\$	4,500.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured c	laims) from line 6j of Schedule E/F	\$	143,958.00
				Your total liabilities	\$	158,337.00
Par	t 3: Summa	rize Your Income and	Expenses			
4.		our Income (Official Fo		1	\$	1,952.00
5.		Your Expenses (Official onthly expenses from li			\$	1,952.00
Par	t 4: Answer	These Questions for	Administrative and Stati	stical Records		
6.	-	• • •	er Chapters 7, 11, or 13? on this part of the form. C	heck this box and submit this form to the court with yo	our other sc	hedules.
7.	YesWhat kind of	f debt do you have?				
				debts are those "incurred by an individual primarily for g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or
	☐ Your de		consumer debts. You have	ve nothing to report on this part of the form. Check thi	s box and s	submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Debtor 1 Channel Rene Chance

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

338.00

\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ \$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	* — \$	0.00
	* \$	
9d. Student loans. (Copy line 6f.)	· —	130,472.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	130,472.00
-9.		100, 112100

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riii in this int	competion to identify your cons	and this filing.		
	ormation to identify your case	-		
Debtor 1	Channel Rene Chance	Middle Name Last Name		
Debtor 2	i iist Name	WINDLE NAME LAST NAME		
(Spouse, if filing)	First Name	Middle Name Last Name		
United States	Bankruptcy Court for the: MIDI	DLE DISTRICT OF NORTH CAROLINA		
^				
Case number				Check if this is ar amended filing
				umenaca ming
Official F	Form 106A/B			
_		N/		4044
schedu	ule A/B: Propert	у		12/15
	· · ·	, or Other Real Estate You Own or Have an Interest In		
Do you own	or have any legal or equitable inter	est in any residence, building, land, or similar property?		
☐ No. Go to	Part 2.			
Vos Who	re is the property?			
— Tes. Wile	re is the property:			
1 1		What is the property? Check all that apply		
1.1 Timesh	are	What is the property? Check all that apply	Do not deduct secured of	aims or exemptions. Put
Timesh	are ess, if available, or other description	Single-family home	Do not deduct secured cl	ed claims on Schedule D:
Timesh		Single-family home Duplex or multi-unit building		ed claims on Schedule D:
Timesh		Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of any secure	ed claims on Schedule D:
Timesh		Single-family home Duplex or multi-unit building	the amount of any secure	ed claims on Schedule D:
Timesh		Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of any secure Creditors Who Have Clai	ed claims on Schedule D: ims Secured by Property.
Timesh		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	the amount of any secure Creditors Who Have Clair Current value of the	ed claims on Schedule D: ms Secured by Property. Current value of the
Timesh Street addre	ess, if available, or other description	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$0.00	cd claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$0.00
Timesh Street addre	ess, if available, or other description	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	Current value of the entire property? \$0.00 Describe the nature of y (such as fee simple, ter	current value of the portion you own?
Timesh Street addre	ess, if available, or other description	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one	Current value of the entire property? \$0.00 Describe the nature of y (such as fee simple, ter a life estate), if known.	current value of the portion your ownership interest
Timesh Street addre	ess, if available, or other description	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only	Current value of the entire property? \$0.00 Describe the nature of y (such as fee simple, ter	current value of the portion your ownership interest
Street addre	ess, if available, or other description	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	Current value of the entire property? \$0.00 Describe the nature of y (such as fee simple, ter a life estate), if known.	current value of the portion your ownership interest
Street addre	ess, if available, or other description	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the entire property? \$0.00 Describe the nature of y (such as fee simple, ter a life estate), if known. Sole Interest	Current value of the portion you own? your ownership interest nancy by the entireties, or
Street addre	ess, if available, or other description	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$0.00 Describe the nature of y (such as fee simple, ter a life estate), if known. Sole Interest Check if this is con (see instructions)	Current value of the portion you own? your ownership interest nancy by the entireties, or
Street addre	ess, if available, or other description	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$0.00 Describe the nature of y (such as fee simple, ter a life estate), if known. Sole Interest Check if this is con (see instructions)	Current value of the portion you own? your ownership interest aancy by the entireties, or

Official Form 106A/B Schedule A/B: Property page 1

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Debtor	r 1 <u>C</u>	hannel Rene Chance	Case	number (if known)	
	you o	wn or have more than one, I	ist here:		
1.2			What is the property? Check all that apply		
	L Time		Single-family home	Do not deduct secured cl	
Si	treet addre	ss, if available, or other description	Duplex or multi-unit building		ed claims on Schedule D: ims Secured by Property.
			Condominium or cooperative		, , ,
			☐ Manufactured or mobile home		
				Current value of the	Current value of the
			Land	entire property?	portion you own?
C	ity	State ZIP Code	☐ Investment property	\$0.00	\$0.00
			Timeshare	Describe the nature of	your ownership interest
			Other	(such as fee simple, ter	nancy by the entireties, or
			Who has an interest in the property? Check one	a life estate), if known.	
			Debtor 1 only	Sole Interest	
			Debtor 2 only		
C	ounty		☐ Debtor 1 and Debtor 2 only	☐ Check if this is cor	nmunity property
			At least one of the debtors and another	(see instructions)	illiumity property
			Other information you wish to add about this item	n, such as local	
			property identification number:		
			*SURRENDERING INTEREST		
			vn for all of your entries from Part 1, including any		\$0.00
pa	ges you	i nave attached for Part 1. Write	that number here		
art 2:	Descri	be Your Vehicles			
□ N ■ Y					
3.1	Make:	Honda	Who has an interest in the property? Check one	Do not deduct secured of	elaims or exemptions. Put ed claims on Schedule D:
	Model:	Civic	■ Debtor 1 only	Creditors Who Have Cla	ims Secured by Property.
	Year:	2013	Debtor 2 only		
		nate mileage: 95,000	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
		ormation:	☐ At least one of the debtors and another	, , , ,	
Γ.		XFB2F83DE060302	At least one of the deptors and another		
		ery Insurance Co.	☐ Check if this is community property	\$6,100.00	\$6,100.00
		#: PAN0485768	(see instructions)		
■ N	o es d the do	ıllar value of the portion you ow	n for all of your entries from Part 2, including any e	entries for	\$6,100.00
Part 3:		be Your Personal and Household It			0
o yo	u own c	or nave any legal or equitable in	terest in any of the following items?		Current value of the portion you own?
					Do not deduct secured
					claims or exemptions.

Official Form 106A/B

Schedule A/B: Property

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D	ebtor 1	Channel Re	ene Chance	Case nu	ımber (if known)	
6	Househo	old goods and	furnishings			
٥.			nces, furniture, linens, china, kitchenwa	are		
	□ No					
	Yes.	Describe				
			Household Goods & Furnishir	nae		\$1,700.00
			Household Goods & Furnishin	iys		Ψ1,700.00
			Misc furniture			\$200.00
7.	Electron	nics				
	Example		and radios; audio, video, stereo, and di ell phones, cameras, media players, gar	gital equipment; computers, printers, sc	anners; music collec	tions; electronic devices
	□ No	including ce	ni priories, cameras, media piayers, gar	iles		
	_	Describe				
			Electronics			\$2,000.00
_						
8.	Collectil	bles of value				
	Example			twork; books, pictures, or other art object	cts; stamp, coin, or b	aseball card collections;
	= N.	other collec	tions, memorabilia, collectibles			
	■ No	Describe				
	□ res.	Describe				
9.		ent for sports				
	Example	es: Sports, phot musical inst		uipment; bicycles, pool tables, golf club	s, skis; canoes and i	kayaks; carpentry tools;
	■ No					
	☐ Yes.	Describe				
40	- :					
10.	Firearn Examp		es, shotguns, ammunition, and related ϵ	equipment		
	■ No	,	, , ,			
	☐ Yes.	Describe				
4.4	Clothe					
11.			clothes, furs, leather coats, designer we	ar, shoes, accessories		
	□ No		-			
	Yes.	Describe				
						4500.00
			Clothing			\$500.00
12.	Jewelr					,
	□ No	oles: Everyday J	eweiry, costume jeweiry, engagement r	ings, wedding rings, heirloom jewelry, w	atches, gems, gold,	silver
		Describe				
	— 1C3.	Describe				
			Jewelry			\$500.00
13	Non-fa	rm animals				
٠.		oles: Dogs, cats	, birds, horses			
	■ No					
	☐ Yes.	Describe				
14	Anv otl	her personal a	nd household items you did not alrea	ady list, including any health aids you	ı did not list	
	■ No	p	The same year and not unot	,, you		
		Give specific in	nformation			

Official Form 106A/B Schedule A/B: Property page 3

De	ebtor 1	Channel Rene	Chan	ce	Case number (if known)	
15					including any entries for pages you have attached	\$4,900.00
Pa	rt 4: De	scribe Your Financia	al Asset	s		
Do	o you ow	vn or have any leg	al or e	quitable interest in any c	of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	■ No			our wallet, in your home, ir	n a safe deposit box, and on hand when you file your petition	on
17.	Examp				certificates of deposit; shares in credit unions, brokerage h the same institution, list each.	ouses, and other similar
	□ No ■ Yes				Institution name:	
			17.1.	Checking Account	NC State Employees' Credit Union	\$5.00
			17.2.	Savings Account	NC State Employees' Credit Union	\$25.00
			17.3.	Cash Points Global	NC State Employees' Credit Union	\$13.00
			17.4.	Savings Account	NC State Employees' Credit Union	\$42.50
			17.5.	Checking Account	Wells Fargo	\$0.00
			17.6.	Business Checking Account	Wells Fargo	\$0.00
			17.7.	Checking Account	Self-Help Credit Union	\$3.00
			17.8.	Checking Account	Fidelity	\$0.00
			17.9.	Savings Account	Fidelity	\$0.00
18.		, mutual funds, or oles: Bond funds, in			ge firms, money market accounts	
				Institution or issuer name:	:	
19.		ublicly traded stoo enture	k and	interests in incorporated	d and unincorporated businesses, including an interest	t in an LLC, partnership, and
		Give specific inform		about themne of entity:	% of ownership:	

Official Form 106A/B Schedule A/B: Property page 4

Debtor	r 1 Channel Rene Chance		Case number (if known)	
Ne	legotiable instruments include person	nd other negotiable and non-negotials all checks, cashiers' checks, promissory you cannot transfer to someone by sign	y notes, and money orders.	
	No			
	Yes. Give specific information about t Issuer nar			
	•	eogh, 401(k), 403(b), thrift savings accor	unts, or other pension or profit-sharing	plans
	Yes. List each account separately. Type of acco	ount: Institution name:		
	IRA	Fidelity		Unknown
22 Sa	ecurity deposits and prepayments			
Yo	our share of all unused deposits you xamples: Agreements with landlords,	have made so that you may continue so prepaid rent, public utilities (electric, ga		ies, or others
	Yes	Institution name or	r individual:	
23. An	nuities (A contract for a periodic pay	yment of money to you, either for life or	for a number of years)	
I	· · ·			
	Yes Issuer name and	description.		
26 (U.S.C. §§ 530(b)(1), 529A(b), and 52	ccount in a qualified ABLE program, 29(b)(1).	or under a qualified state tuition pro	gram.
■ N	• • •	and description. Separately file the reco	rds of any interests.11 U.S.C. § 521(c):	
25. T ru	•	in property (other than anything lister	d in line 1), and rights or powers exe	rcisable for your benefit
`	Yes. Give specific information about	them		
		de secrets, and other intellectual prop bsites, proceeds from royalties and lice		
	No Yes. Give specific information about	them		
	,	licenses, cooperative association holding	ngs, liquor licenses, professional license	es
_	Yes. Give specific information about	them		
Money	y or property owed to you?			Current value of the portion you own? Do not deduct secured
	x refunds owed to you			claims or exemptions.
□ N	• • •	them, including whether you already file	ad the returns and the tay years	
- 1	res. Give specific information about t	nem, including whether you already life	d the returns and the tax years	
		2019 Federal Tax Refund (Amount: \$293 - Already F	Received) Federal	\$0.00
	a <mark>mily support</mark> Examples: Past due or lump sum alimo	ony, spousal support, child support, mai	intenance, divorce settlement, property	settlement
	·		71 11 9	

 $\hfill \square$ Yes. Give specific information.....

D	ebtor 1	Channel Rene Chance	Case number (if known)	
30.		amounts someone owes you oles: Unpaid wages, disability in benefits; unpaid loans you	surance payments, disability benefits, sick pay, vacation pay, workers' compe made to someone else	ensation, Social Security
	_	Give specific information		
			COVID-19 payment pursuant to CARES Act. (Amount: \$1,200 - Already Received)	\$0.00
31.	Examp ■ No	, ,,	urance; health savings account (HSA); credit, homeowner's, or renter's insura	ince
	⊔ Yes.	Name the insurance company of Company		Surrender or refund
32.	If you a someo		you from someone who has died ast, expect proceeds from a life insurance policy, or are currently entitled to red	value: ceive property because
33.	Examp ■ No		er or not you have filed a lawsuit or made a demand for payment eputes, insurance claims, or rights to sue	
34.	■ No	contingent and unliquidated of Describe each claim	laims of every nature, including counterclaims of the debtor and rights t	o set off claims
35.	. Any fin	ancial assets you did not alre	eady list	
	■ No □ Yes.	Give specific information		
36			entries from Part 4, including any entries for pages you have attached	\$88.50
Pa	art 5: De	scribe Any Business-Related Pro	perty You Own or Have an Interest In. List any real estate in Part 1.	
37.		own or have any legal or equitable	e interest in any business-related property?	
	Yes. G	So to line 38.		
				Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	■ No	nts receivable or commission Describe	s you already earned	
39.	Examp ■ No	equipment, furnishings, and soles: Business-related computer	supplies rs, software, modems, printers, copiers, fax machines, rugs, telephones, desk	s, chairs, electronic devices
40.	. Machi r ■ No	nery, fixtures, equipment, sup	plies you use in business, and tools of your trade	

Official Form 106A/B Schedule A/B: Property page 6

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Debtor 1	Channel Rene Chance	Case number (if known)	
☐ Yes.	. Describe		
41. Invent ■ No	tory		
	. Describe		
42. Interes	sts in partnerships or joint ventures		
	. Give specific information about them Name of entity:	% of ownership:	
	mer lists, mailing lists, or other compilations		
■ No. □ Do yo	our lists include personally identifiable information (as defined in 11 U.S.C. § 10	01(41A))?	
	■ No □ Yes. Describe		
44. Any b i □ No	usiness-related property you did not already list		
Yes.	. Give specific information		
	Sole proprietorship: Chance Services		\$0.00
	the dollar value of all of your entries from Part 5, including any entri Part 5. Write that number here		\$0.00
	escribe Any Farm- and Commercial Fishing-Related Property You Own or Hav you own or have an interest in farmland, list it in Part 1.	ve an Interest In.	
`	u own or have any legal or equitable interest in any farm- or comme . Go to Part 7.	rcial fishing-related property?	
	s. Go to line 47.		
Part 7:	Describe All Property You Own or Have an Interest in That You Did Not Lis	st Above	
	u have other property of any kind you did not already list? sples: Season tickets, country club membership		
Yes.	. Give specific information		
	Possible Consumer Rights Claim(s). Subject to approval of settlement/award Unless otherwise specified, no specific of		\$0.00

Official Form 106A/B Schedule A/B: Property page 7

Debtor 1 **Channel Rene Chance** Case number (if known) **.IMPORTANT NOTICES:** (1) Valuation Method (Sch. A & B): FMV unless otherwise noted. (2) Creditor claims disclosed on Sch. D, E & F are estimates only, drawn largely from unverified information provided by the creditor, and shall not be considered an admission by the Debtor(s) of the amount owed, interest, late fees, etc. Nor is this listing of a creditor or representatives an admission by the Debtor(s) that such parties are \$0.00 actual owners of such claims. \$0.00 Any other value (See * - Sch B) * Any other value, not otherwise listed, including without limitation, any and all amounts on deposit, if any, as of the date of filing, in bank or investment accounts, but not exceeding in value the residual value Unknown available under the "wildcard" (NCGS 1C-1601(a)(2)) exemption 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$6,100.00 57. Part 3: Total personal and household items, line 15 \$4,900.00 58. Part 4: Total financial assets, line 36 \$88.50 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00

\$0.00

\$11,088.50

Copy personal property total

Official Form 106A/B Schedule A/B: Property

61. Part 7: Total other property not listed, line 54

62. Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

page 8

\$11,088.50

\$11,088.50

91C (09/13)

UNITED STATES BANKRUPTCY COURT MIDDLE DISTRICT OF NORTH CAROLINA

In the Matter of: Channel Rene Chance)	Case No.			
	Debtor.)))	DEBTOR'S	CLAIM FOR P	ROPERTY EXEM	PTIONS
I, Channel Rene Chance , the under 522(b)(3)(A), (B), and (C), the Laws						J.S.C. §
☐ Check if the debtor of debtor or a dependent of			nterest that exc	ceeds \$125,000	in value in prope	erty that the
1. REAL OR PERSONAL PI BURIAL PLOT. (NCGS 10 Select appropriate exemption ■ Total net value not	C-1601(a)(1)). n amount below: to exceed \$35,000. to exceed \$60,000.	(Debtor is unn	narried, 65 ye	ars of age or old	der, property was	previously
Description of Property & Address -NONE-	Market Value	Mtg. Holde Holder(s)	r or Lien		Amt. Mtg. or Lien	Net Value
(b) Unuse (This amo	Exemption d portion of exempt ount, if any, may be tion in any property	carried forwar	rd and used to			0.00 0.00 5,000.00
the laws of the State of North						(22(b)(3)(B) and
Description of Property & Address -NONE-	Market Value	Mtg. Holde Holder(s)	er or Lien		Amt. Mtg. or Lien	Net Value
3. MOTOR VEHICLE. (NCC exempt not to exceed \$3,500		Only one vehic	cle allowed un	nder this paragra	aph with net valu	e claimed as
Year, Make, Model of Auto 2013 Honda Civic 95,000 miles VIN: 19XFB2F83DE060302 Discovery Insurance Co. Policy #: PAN0485768	Market Value 6,100.00	Lien Holde			Amt. Lien 9,556.00	Net Value 0.00
(a) Statutory allowance			\$	3,500		
(b) Amount from 1 (b) above to be used (A part or all of 1 (b) may be used		h.	\$			
	Total N	let Exemption	\$	0.00		
4. TOOLS OF TRADE, IMP debtor's dependent. Total ne					01(a)(5). Used b	y debtor or

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91C (0	09/13)	Market				Net
Descr -NON	ription E-	Value	Lien Holder	(s)	Amt. Lien	Value
	tatutory allowance			\$	2,000	
	mount from 1 (b) above to be used A part or all of 1 (b) may be used		h.	\$		
		Total N	let Exemption	\$	0.00	
5.	PERSONAL PROPERTY US DEBTOR'S DEPENDENTS. debtor plus \$1,000 for each de	(NCGS 1C-1601	(a)(4). Debtor's	s aggregate interes	st, not to exceed \$5,000 in va	
Cloth		Market Value 500.00	Lien Holder	(s)	Amt. Lien	Net Value 500.00
	ronics ehold Goods &	2,000.00				2,000.00
Furni	shings	1,700.00				1,700.00
Jewe Misc	furniture	500.00 200.00	Kimbrell's of	North Carolina,	323.00	500.00 0.00
					Total Net Value	4,700.00
(a) S1	tatutory allowance for debtor			\$	5,000	
(b) Si \$1,00 (c) A	tatutory allowance for debtor's de 0 each (not to exceed \$4,000 tota mount from 1(b) above to be used A part or all of 1 (b) may be used	for dependents) d in this paragraph			,000.00	
				Tot	al Net Exemption	4,700.00
6.	LIFE INSURANCE. (As prov	vided in Article X	, Section 5 of N	North Carolina Cor	nstitution.)	
	Name of Insurance Company\F-NONE-	Policy No.\Name o	of Insured\Police	y Date\Name of E	Beneficiary	
7.	PROFESSIONALLY PRESO 1C-1601(a)(7). No limit on va			R DEBTOR OR I	DEBTOR'S DEPENDENT	S). (NCGS
	Description: -NONE-					
8.	DEBTOR'S RIGHT TO RECamount.)	CEIVE FOLLOV	VING COMPI	ENSATION: (NC	GS 1C-1601(a)(8). No limi	t on number or
	Poss A. \$		proval of settle	ment/award by B	ankruptcy Court. s are known at present.	
9.	INDIVIDUAL RETIREMENTREATED IN THE SAME NREVENUE CODE. (NCGS DEFINED IN 11 U.S.C. § 522	MANNER AS AN .C-1601(a)(9). No	N INDIVIDUA	L RETIREMEN	T PLAN UNDER THE IN	TERNAL

Detailed Description IRA: Fidelity

Unknown

Value

91C (09/13)

10.	COLLEGE SAVINGS PLAN (NCGS 1C-1601(a)(10). Total plan within the preceding 12 m to the extent that the funds are expenses.)	net value not to onths not in the o	exceed \$25,000 and may not ordinary course of the debtor	include any funds placed in s financial affairs. This exer	a college saving nption applies only
	Detailed Description -NONE-			,	Value
11.	RETIREMENT BENEFITS I UNITS OF OTHER STATES THAT STATE OR GOVERN	, TO THE EXT	ENT THOSE BENEFITS A	ARE EXEMPT UNDER TH	
	Description: -NONE-				
12.	ALIMONY, SUPPORT, SEP on amount to the extent such pa				
	Description: -NONE-				
13.	ANY OTHER REAL OR PER HAS NOT PREVIOUSLY BY remaining amount available under the state of the st	EEN CLAIMED	ABOVE. (NCGS 1C-1601	(a)(2). The amount claimed	
	ription other value (See * - Sch B)	Market Value 0.00	Lien Holder(s)	Amt. Lien	Net Value 0.00
Busir	ness Checking Account:				
	Fargo Points Global: NC State	0.00			0.00
Empl	oyees' Credit Union	13.00			13.00
	king Account: Fidelity	0.00			0.00
	king Account: NC State oyees' Credit Union	5.00			5.00
Chec Credi	king Account: Self-Help it Union	3.00			3.00
Fargo		0.00			0.00
CARE	D-19 payment pursuant to ES Act. Junt: \$1,200 - Already				
Rece	ived)	0.00			0.00
Feder Refur	ral: 2019 Federal Tax				
	unt: \$293 - Already	0.00			0.00
Rece	ived) ngs Account: Fidelity	0.00			0.00
	ngs Account: NC State				
	oyees' Credit Union	25.00			25.00
Empl	ngs Account: NC State oyees' Credit Union	85.00			42.50 50% owned
	proprietorship: ce Services	0.00			0.00
(a) To	otal Net Value of property claimed	l in paragraph 13.		\$	88.50
	otal amount available from paragra		4 6 11	\$	5,000.00
(c) Le	ess amounts from paragraph 1(b) v F	vhich were used i Paragraph 3(b)	in the following paragraphs:		

Paragraph 4(b)

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DATE June 10, 2020	/s/ Channel	Rene Chance	
-NONE-			
	Iarket Value Lien Holder(s)	Amt. Lien	Net Value
List tangible personal property purchased by the c	* *	ding the filing of the bankruptcy pe	
TOTAL VALUE OF PROPERTY CLAIME 16. RECENT PURCHASES The exemptions provided in NCGS 1C-1601(a)(2 purchased by the debtor less than 90 days precedibankruptcy, unless the purchase of the property is and no additional property was transferred into or	2), (3), (4), and (5) are inapplicating the initiation of judgment cs directly traceable to the liquication rused to acquire the replacement	collection proceedings or the filing dation or conversion of property that ent property.	of a petition for at may be exempt
-NONE-			
15. EXEMPTIONS CLAIMED UNDER N	NON-BANKRUPTCY FEDE	RAL LAW:	
-NONE- TOTAL VALUE OF PROPERTY CLAIME	ED AS EXEMPT		0.00
14. OTHER EXEMPTIONS CLAIMED U	UNDER THE LAWS OF TH	E STATE OF NORTH CAROLI	NA:
	Net Balance Available from p Total N	oaragraph 1(b) \$ Net Exemption \$	5,000.00
Paragraph	n 5(c) \$		
91C (<i>09/13</i>)	~ ()		

Debtor

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		2002200	0, = 0.			
Fill in this informa	ation to identify you	r case:				
Debtor 1	Channel Rene C	chance				
	First Name	Middle Name Last Na	me			
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Na				
(Spouse II, IIIIIIg)	riistivaille	iviidule Name Last Na	ille			
United States Bank	cruptcy Court for the:	MIDDLE DISTRICT OF NORTH CARO	LINA		-	
Case number						
(if known)					_	if this is an
					ameno	ded filing
Official Form	106D					
		Who Have Claims Secu	ırad	by Proport	N/	12/15
Scriedule L	J. Creditors	WIIO Have Claims Sect	ıı eu	by Propert	<u>y</u>	12/15
		f two married people are filing together, both out, number the entries, and attach it to this fo				
, ,	ave claims secured by	your property?				
_ `	_	nis form to the court with your other schedul	es Yo	u have nothing else t	o report on this form	
<u></u>		•	00. 10	a nave nothing clock	o report on the form.	
	all of the information l	Delow.				
Part 1: List All	Secured Claims			Column A	Column B	Column C
		nore than one secured claim, list the creditor sepa a particular claim, list the other creditors in Part 2		Amount of claim	Value of collateral	Unsecured
		cal order according to the creditor's name.	L. A5	Do not deduct the	that supports this	portion
Holiday Inn	Club			value of collateral.	claim	If any
Vacations	Club	Describe the property that secures the claim	:	Unknown	\$0.00	Unknown
Creditor's Name		Timeshare				
Attn: Office		*SURRENDERING INTEREST				
8505 W. Irlo		As of the date you file, the claim is: Check all t	hat			
Memorial H Kissimmee	,	apply.	ilut			
34747-8201	,	☐ Contingent				
Number, Street, C	City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt	t? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mortgage	or secu	ıred		
Debtor 2 only		car loan)				
Debtor 1 and Debt	•	Statutory lien (such as tax lien, mechanic's li	ien)			
At least one of the		☐ Judgment lien from a lawsuit		-		
☐ Check if this clair community debt		Other (including a right to offset)	ed of	rust		
Date debt was incur	rod	Last 4 digits of account number				

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Debtor 1 Channel Rene Chance		Case number (if known))	
First Name Middle N	lame Last Name	,		
O.O. Hama Cradit	Describe the property that accuracy the	laim.	¢c 400 00	¢2 456 00
2.2 Home Credit Creditor's Name	Describe the property that secures the d	laim: \$9,556.00	\$6,100.00	\$3,456.00
Ordano o Hamo	2013 Honda Civic 95,000 miles VIN: 19XFB2F83DE060302			
A == 11	Discovery Insurance Co.			
ATTN: Officer	Policy #: PAN0485768			
2005 N. Pointe Drive Suite A-11	As of the date you file, the claim is: Chec	k all that		
Durham, NC 27705	apply.			
Number, Street, City, State & Zip Code	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only	☐ An agreement you made (such as mort	nage or secured		
Debtor 2 only	car loan)	gago or cocarca		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechan	io'o lion)		
At least one of the debtors and another	☐ Judgment lien from a lawsuit	ic's lien)		
Check if this claim relates to a	_ ~	rchase Money Security In	nterest	
community debt	Other (including a right to offset)	ionass money cocarry m	101001	
D. (1.1)	Lord A. P. W. of a control of a control			
Date debt was incurred 11/07/2019	Last 4 digits of account number			
Kimbrell's of North				
Carolina, Inc.	Describe the property that secures the o	laim: \$323.00	\$200.00	\$123.00
Creditor's Name	Misc furniture			
ATTN: Officer	As of the data was file the alaim in a			
101 W Chapel Hill Street	As of the date you file, the claim is: Checapply.	k all that		
Durham, NC 27701	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mort	gage or secured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechan	ic's lien)		
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)	rchase Money Security In	nterest	
community debt				
Date debt was incurred	Last 4 digits of account number			
2.4 Westgate Resorts, LTD	Describe the property that secures the o	laim: Unknown	\$0.00	Unknown
Creditor's Name	FL Timeshare			
Attack Management Amount	*SURRENDERING INTEREST			
Attn: Managing Agent 5601 Windhover Drive	As of the date you file, the claim is: Chec	k all that		
Orlando, FL 32819-7905	apply.			
Number, Street, City, State & Zip Code	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only	☐ An agreement you made (such as mort	gage or secured		
Debtor 2 only	car loan)	, ,		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechan	ic's lien)		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	io o nonj		
☐ Check if this claim relates to a	•	Deed of Trust		
community debt	— Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$9,879.00

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Debtor 1	Channel Rene	Chance		Case number (if known)	
	First Name	Middle Name	Last Name		
	the last page of you at number here:	ır form, add the dollar va	lue totals from all pages.	\$9,879.0	0

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in this inform	ation to identify your	case:						
Debtor 1	Channel Rene Ch	Middle Na	ne	Last Name				
Debtor 2								
(Spouse if, filing)	First Name	Middle Na	ne	Last Name				
United States Ban	kruptcy Court for the:	MIDDLE DIS	TRICT OF NORTH	H CAROLINA				
Case number								
(if known)							Check	if this is an
						_	amend	ed filing
Official Form	100F/F							
Official Form	<u>। ।⊍७⊏/୮</u> /F: Creditors W	lha Haya	Uncocurad	Claime				12/15
	accurate as possible. Us				or craditors with NON	IDDIODITY 6	laime Li	
	acts or unexpired leases							
	ory Contracts and Unexpors Who Have Claims Sec							
left. Attach the Cont	inuation Page to this pag							
name and case num	, ,							
	of Your PRIORITY Un							
_ `	rs have priority unsecure	d claims agains	you?					
☐ No. Go to Pa	art 2.							
Yes.								
	priority unsecured claims e of claim it is. If a claim ha							
possible, list the	claims in alphabetical orde	er according to the	e creditor's name. If y	you have more than tw				
	nan one creditor holds a pa							
(For an explana	tion of each type of claim, s	see the instruction	is for this form in the	instruction bookiet.)	Total claim	Priority		Nonpriority
D	0 / 7 0 11 /				40.00	amount	40.00	amount
	County Tax Collect ditor's Name	or Las	st 4 digits of accour	nt number	\$0.00		\$0.00	\$0.00
P.O.Box		Wh	en was the debt inc	curred?				
	, NC 27702					_		
	reet City State Zip Code the debt? Check one.			, the claim is: Check a	all that apply			
_		_	Contingent					
Debtor 1 or	nly	Ц	Unliquidated					
Debtor 2 or	nly		Disputed					
Debtor 1 ar	nd Debtor 2 only		e of PRIORITY uns					
☐ At least one	e of the debtors and anothe	er 🗆	Domestic support ob	oligations				
☐ Check if th	nis claim is for a commur	nity debt	Taxes and certain ot	ther debts you owe the	government			
Is the claim s	ubject to offset?		Claims for death or p	personal injury while yo	ou were intoxicated			
■ No			Other. Specify					
☐ Yes			No	tice Purposes O	nly			
2.2 Internal	Revenue Service (M	ID)** Lac	st 4 digits of accour	at number	\$0.00		\$0.00	\$0.00
	ditor's Name	10) La	st 4 digits of accoun		φυ.υυ		φυ.υυ	φυ.υυ
	ice Box 7346		en was the debt inc	curred?		_		
	phia, PA 19101-7346 reet City State Zip Code		of the date you file	, the claim is: Check a	all that annly			
	the debt? Check one.		Contingent	, the claim is. Oneck a	ян инас арріу			
■ Debtor 1 or		_	J					
	·	_	Unliquidated					
Debtor 2 or			Disputed	and alabas				
	nd Debtor 2 only		pe of PRIORITY uns					
	e of the debtors and anothe	_	Domestic support ob	·				
	nis claim is for a commur	-		ther debts you owe the	-			
	ubject to offset?	_	-	personal injury while yo	ou were intoxicated			
■ No			Other. Specify	diaa Duuri				
☐ Yes			No	tice Purposes O	nıy			

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Debtor 1 Channel Rene	Chance		Case numbe	r (if known)		
2.3 Law Offices of Jo		Last 4 digits of account numbe	r	\$4,500.00	\$4,500.00	\$0.00
Priority Creditor's Name 6616-203 Six For Raleigh, NC 2761	ks Road	When was the debt incurred?	2020			
Number Street City Sta		As of the date you file, the clair	n is: Check all that	apply		
Who incurred the debt?	Check one.	☐ Contingent				
Debtor 1 only		☐ Unliquidated				
Debtor 2 only		☐ Disputed				
Debtor 1 and Debtor 2	only	Type of PRIORITY unsecured c	laim:			
☐ At least one of the debt	tors and another	☐ Domestic support obligations				
☐ Check if this claim is	for a community debt	☐ Taxes and certain other debts☐ Claims for death or personal in				
Is the claim subject to of ■ No	rsetr	■ Other. Specify Administr				
☐ Yes		Attorney's				
	ept. of Revenue**	Last 4 digits of account numbe	r	\$0.00	\$0.00	\$0.00
Priority Creditor's Name Post Office Box 1 Raleigh, NC 2760	1168	When was the debt incurred?				
Number Street City Sta		As of the date you file, the clair	n is: Check all that	apply		
Who incurred the debt?	Check one.	☐ Contingent				
■ Debtor 1 only		☐ Unliquidated				
☐ Debtor 2 only		☐ Disputed				
Debtor 1 and Debtor 2	only	Type of PRIORITY unsecured c	laim:			
☐ At least one of the debt	tors and another	☐ Domestic support obligations				
☐ Check if this claim is	for a community debt	■ Taxes and certain other debts	you owe the govern	nment		
Is the claim subject to of	fset?	☐ Claims for death or personal in	njury while you were	intoxicated		
■ No		Other. Specify				
☐ Yes		Notice Pu	rposes Only			
Part 2: List All of Your N	NONPRIORITY Unsecu	urad Claima				
3. Do any creditors have non						
•		this form to the court with your other	r achadulas			
_	report in this part. Submit	this form to the court with your other	scriedules.			
Yes.						
unsecured claim, list the cre	ditor separately for each c	e alphabetical order of the creditor laim. For each claim listed, identify v creditors in Part 3.lf you have more	what type of claim it	is. Do not list claims	already included in Par	t 1. If more

Total claim

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Debtor	Channel Rene Chance	Case number (if known)	
4.1	.IMPORTANT NOTICE:	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name See notice re: creditor claims set forth on Schedule A	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.2	AmeriFinancial Solutions, LLC ****	Last 4 digits of account number	\$900.00
	Nonpriority Creditor's Name Post Office Box 65018 Baltimore, MD 21264-5018	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
		Medical Collection Accounts	
	Yes	Disputed re: amt, int, fees, ownership, etc. NOT ADMITTED	
4.3	AT&T **	Last 4 digits of account number	\$900.00
	Nonpriority Creditor's Name Wireless Correspondence Post Office Box 10330	When was the debt incurred?	
	Fort Wayne, IN 46851-0330 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Services Rendered Disputed re: amt, int, fees, ownership, etc. NOT ADMITTED	

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Debto	Channel Rene Chance	Case number (if known)	
4.4	Consumer Cellular Nonpriority Creditor's Name	Last 4 digits of account number	\$234.00
	12447 SW 69th Avenue Portland. OR 97223-8517	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	— No	Services Rendered	
	Yes	Disputed re: amt, int, fees, ownership, etc. NOT ADMITTED	
4.5	Durham County EMS	Last 4 digits of account number	\$670.00
	Nonpriority Creditor's Name PO Bo 600116 Raleigh, NC 27675	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Medical Bill Disputed re: amt, int, fees, ownership, etc. NOT ADMITTED Medical Bill Not Admit Specify Not Admit Specify	
4.6	E-Recovery Solutions	Last 4 digits of account number	\$200.00
	Nonpriority Creditor's Name 1650 Cambria Street, NE Christiansburg, VA 24073	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Medical Collection Accounts Disputed re: amt, int, fees, ownership, etc. Other. Specify NOT ADMITTED	
		· · · · · · · · · · · · · · · · · · · ·	

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btor 1 Channel Rene Chance	Case number (if known)	
Hertz Rental	Last 4 digits of account number	\$3,000.00
Nonpriority Creditor's Name Post Office Box 26120 Oklahoma City, OK 73126	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Services Rendered Disputed re: amt, int, fees, ownership, etc. Other. Specify NOT ADMITTED	
Nelnet ***	Last 4 digits of account number	\$125,265.00
Nonpriority Creditor's Name		\$125,265.00
Education Planning & Financing Post Office Box 82561 Lincoln, NE 68501-2561	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	Student loansObligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
	Student Loan Disputed re: amt, int, fees, ownership, etc. NOT ADMITTED	
Sprint**	Last 4 digits of account number	\$850.00
Nonpriority Creditor's Name Attn Bankruptcy Dept 6200 Sprint Parkway	When was the debt incurred?	
Overland Park, KS 66251 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Services Rendered Disputed re: amt, int, fees, ownership, etc. Other. Specify NOT ADMITTED	

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Debt	or 1 Channel Rene Chance	Case number (if known)	
4.1 0	State Employees' Credit Union****	Last 4 digits of account number	\$285.00
	Nonpriority Creditor's Name Attn: Officer Post Office Box 28540 Raleigh, NC 27611-8540	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Line of Credit Disputed re: amt, int, fees, ownership, etc. NOT ADMITTED	
4.1 1	StoreSmart Self-Storage	Last 4 digits of account number	\$1,297.00
	Nonpriority Creditor's Name 1651 TW Alexander Dr Durham, NC 27703	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Services Rendered Disputed re: amt, int, fees, ownership, etc. Other. Specify NOT ADMITTED	

Debtor 1 Channel Rene Chance		Case number (if known)				
4.1 2	T-Mobile***	Last 4 digits of account number	\$800.00			
	Nonpriority Creditor's Name Customer Relations Post Office Box 37380	When was the debt incurred?				
	Albuquerque, NM 87176-7380 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	□ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	Services Rendered Disputed re: amt, int, fees, ownership, etc. NOT ADMITTED				
4.1 3	Tom White	Last 4 digits of account number	Unknown			
	Nonpriority Creditor's Name	When was the debt incomed?				
	Unknown Address	When was the debt incurred?				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	Lease Deficiency Disputed re: amt, int, fees, ownership, etc. NOT ADMITTED				
4.1 4	US Department of Education***	Last 4 digits of account number	\$5,207.00			
	Nonpriority Creditor's Name Direct Loan Servicing Center Post Office Box 5609	When was the debt incurred?				
	Greenville, TX 75403-5609 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify				
		Student Loan Disputed re: amt, int, fees, ownership, etc.				

Debto	or 1 Channel Rene Chance		Case number (if known)	
		N	NOT ADMITTED	
4.1 5	Wesley E. King DDS PA	Last 4 digits of acco	ount number	\$4,350.00
	Nonpriority Creditor's Name 2705 Chapel Hill Rd Durham, NC 27707	When was the debt	incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you fi	file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORI	RITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising	ng out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority clain	ms	
	■ No	Debts to pension	or profit-sharing plans, and other similar debts	
			Medical Bill	
	☐ Yes		Disputed re: amt, int, fees, ownership, etc. NOT ADMITTED	
Part :	3: List Others to Be Notified About a D	eht That You Already Lie	isted	
noti Name Cred 102	e more than one creditor for any of the debts the fified for any debts in Parts 1 or 2, do not fill out and Address lit Bureau Assoc. Sailors Drive ay, GA 30540	or submit this page.	Part 2: Creditors with Nonpriority Unsecured Clair	·
	and Address	•	r Part 2 did you list the original creditor?	
for N Post	Department of Justice NC Department of Revenue t Office Box 629	Line 2.4 of (Check one):	■ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Clai	ms
каіе	eigh, NC 27602-0629	Last 4 digits of account num	mber	
Prof 400	and Address essional Credit Service International Way	On which entry in Part 1 or Line 4.4 of (<i>Check one</i>):	r Part 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Clai	ms
Spri	ngfield, OR 97477	Last 4 digits of account num	• •	
	and Address Honorable Matthew Whitaker	On which entry in Part 1 or Line 4.14 of (<i>Check one</i>):	r Part 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims	
U.S. 950	Department of Justice Pennsylvania Ave. NW hington, DC 20530-0001	Line 4.14 Of (Check One).	Part 2: Creditors with Nonpriority Unsecured Clair	ms
	3 ,	Last 4 digits of account nun	mber	
The U.S. 950	and Address Honorable Matthew Whitaker Department of Justice Pennsylvania Ave. NW hington, DC 20530-0001	On which entry in Part 1 or Line 4.8 of (<i>Check one</i>):	r Part 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Clai	ms
7143	9.011, 20 20000-0001	Last 4 digits of account num	mber	
	and Address		r Part 2 did you list the original creditor?	
U.S.	Attorney General Department of Justice	Line 2.2 of (Check one):	■ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Clai	ms

Official Form 106 E/F

Washington, DC 20530-0001

Last 4 digits of account number

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Debtor 1 Channel Rene Chance		Case number (if known)
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
US Attorney's Office (MD)**	Line 2.2 of (Check one):	■ Part 1: Creditors with Priority Unsecured Claims
101 S. Edgeworth Street, 4th floor Greensboro, NC 27401		☐ Part 2: Creditors with Nonpriority Unsecured Claims
Greensboro, No 27401	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
US Attorney's Office (MD)**	Line 4.14 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
101 S. Edgeworth Street, 4th floor Greensboro, NC 27401		Part 2: Creditors with Nonpriority Unsecured Claims
G1661135010, NO 27 401	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
US Attorney's Office (MD)**	Line 4.8 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
101 S. Edgeworth Street, 4th floor Greensboro, NC 27401		■ Part 2: Creditors with Nonpriority Unsecured Claims
0.000.000.000.000.0000.0000	Last 4 digits of account number	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 4,500.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 4,500.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 130,472.00
rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 13,486.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 143,958.00

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Fill in this inform					
Debtor 1 Channel Rene Chance					
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		MIDDLE DISTRICT OF NORTH CAROLINA			
Case number					
(if known)					Check if this is an
					amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

P	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	DIRECTV ** ATTN: Bankruptcies Post Office Box 6550 Greenwood Village, CO 80155-6550	Satellite Contract Terms: 2 Years Beginning Date: 03/2020
2.2	Holiday Inn Club Vacations Attn: Officer 8505 W. Irlo Bronson Memorial Hwy Kissimmee, FL 34747-8201	Timeshare maintenance fees
2.3	Westgate Resorts, LTD Attn: Managing Agent 5601 Windhover Drive Orlando, FL 32819-7905	Timeshare maintenance fees

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Fill in this	information to identify you	r case:			
Debtor 1	Channel Rene C				
Dobtor 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	MIDDLE DISTRICT OF	NORTH CAROLINA		
Case num	her				
(if known)				_	Check if this is an
				a	mended filing
Officia	l Form 106H				
Sched	lule H: Your Cod	debtors			12/15
our name	and case number (if known	n). Answer every question		o this page. On the top of any Add as a codebtor.	o.iai i agos, iiiis
■ No					
☐ Yes	S				
Arizon 	hin the last 8 years, have yo a, California, Idaho, Louisiana Go to line 3.			y? (Community property states and ington, and Wisconsin.)	territories include
	s. Did your spouse, former spo	ouse, or legal equivalent live	e with you at the time?		
			, , , , , , , , , , , , , , , , , , , ,		
in line Form	e 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	if your spouse is filing with you. I sure you have listed the creditor o 16G). Use Schedule D, Schedule E/	on Schedule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and	ZIP Code		Column 2: The creditor to who Check all schedules that apply:	•
	, , , , , , , , , , , , , , , , , , ,			Official addication that apply.	
3.1	Name			Schedule D, line	
	reame			☐ Schedule E/F, line	
_	November 2			— Gorieddie G, iirie	<u> </u>
	Number Street City	State	ZIP Code		
3.2	Name			Schedule D, line	_
				☐ Schedule E/F, line	<u></u>
=	Number Street				_
	City	State	ZIP Code		

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							_				
Fill	in this information t	to identify your ca	ase:								
Del	btor 1	Channel Rer	ne Chance			_					
1	btor 2 buse, if filing)					_					
Uni	ited States Bankrup	otcy Court for the	MIDDLE DISTRICT O	F NORTH CAROLIN	IA	_					
Case number ((f known)				Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date:							
0	<u>fficial Form</u>	<u> 106l</u>					N	1M / DD/ Y	YYYY		
S	chedule I:	Your Inco	ome								12/15
sup spo atta Pa	plying correct info use. If you are sep ch a separate she tt 1: Describ	ormation. If you parated and you et to this form. (sible. If two married peo are married and not filii r spouse is not filing wi On the top of any additi	ng jointly, and your ith you, do not inclu	spouse i	s liv nati	ing with on about	you, incl	ude info ouse. If 1	rmation about more space is	your needed,
1.	Fill in your empl information.	oyment		Debtor 1				Debtor 2 or non-filing spouse			
	If you have more than one job, attach a separate page with		Employment status	☐ Employed	Employed			☐ Employed			
	information about employers.			■ Not employed	■ Not employed			☐ Not employed			
			Occupation	Disabled							
	Include part-time, self-employed wo		Employer's name								
	Occupation may i or homemaker, if		Employer's address								
			How long employed to	here?							
Par	rt 2: Give De	tails About Mon	thly Income								
	mate monthly incouse unless you are		ate you file this form. If	you have nothing to r	eport for a	any	line, write	e \$0 in the	space. I	Include your no	n-filing
	ou or your non-filing e space, attach a se		ore than one employer, co this form.	ombine the information	on for all e	mplo	oyers for	that perso	on on the	e lines below. If	you need
							For Del	otor 1		Debtor 2 or filing spouse	
2.			ry, and commissions (be calculate what the monthl		2.	\$		0.00	\$	N/A	
3.	Estimate and lis	t monthly overti	me pay.		3.	+\$		0.00	+\$_	N/A	
4.	Calculate gross	Income. Add lin	e 2 + line 3.		4.	\$		0.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Debtor	Channel Rene Chance	_	Case	number (if known)			
			Foi	Debtor 1	For De	btor 2 or	
						ing spouse	
(Copy line 4 here	4.	\$_	0.00	\$	N/A	
5. L	List all payroll deductions:						
5	5a. Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A	
5	5b. Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	
5	5c. Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	
5	5d. Required repayments of retirement fund loans	5d.	\$_	0.00	\$	N/A	
	5e. Insurance	5e.	\$_	0.00	\$	N/A	
	56. Domestic support obligations	5f.	\$_	0.00	\$	N/A	
	5g. Union dues 5h. Other deductions. Specify:	5g. 5h.+		0.00	* + \$	N/A N/A	
	Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.	\$ \$	0.00	\$	N/A	
	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	* – \$	0.00	\$ 	N/A	
		7.	Ψ_	0.00	Ψ	IN/A	
	List all other income regularly received: 8a. Net income from rental property and from operating a business,						
	profession, or farm						
	Attach a statement for each property and business showing gross						
	receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A	
8	8b. Interest and dividends	8b.	\$-	0.00	\$	N/A	
8	8c. Family support payments that you, a non-filing spouse, or a dependent	t	_				
	regularly receive						
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	338.00	\$	N/A	
8	Bd. Unemployment compensation	8d.	\$-	0.00	\$	N/A	
8	Be. Social Security	8e.	\$	1,147.00	\$	N/A	
8	8f. Other government assistance that you regularly receive		· -	.,	· 		
	Include cash assistance and the value (if known) of any non-cash assistance	е					
	that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.						
	Specify: Food Stamps	8f.	\$	16.00	\$	N/A	
		_	· —		· —		
	SSI for minor child		\$_	451.00	\$	N/A	
	8g. Pension or retirement income	8g.	\$_	0.00	\$	N/A	
8	8h. Other monthly income. Specify:	8h.+	\$_	0.00	+ \$	N/A	
9. <i>A</i>	Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,952.00	\$	N/A	
10	Coloulate monthly income. Add line 7 - line 0	10 6		4.052.00	-	N/A	4.050.00
	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		1,952.00 + \$_		N/A = \$	1,952.00
	9 .	. <u> </u> ⊢					
	State all other regular contributions to the expenses that you list in Schedule Include contributions from an unmarried partner, members of your household, you		dents	vour roommates	s. and		
	other friends or relatives.			, ,	,		
	Do not include any amounts already included in lines 2-10 or amounts that are not	availab	le to	pay expenses list	ed in Sch		
٤	Specify:					11. +\$	0.00
12. <i>I</i>	Add the amount in the last column of line 10 to the amount in line 11. The re-	sult is th	ne cor	mbined monthly in	ncome.		
	Write that amount on the Summary of Schedules and Statistical Summary of Certa	in Liabi	lities	and Related Data	, if it	12 6	1,952.00
a	applies					12. \$	1,332.00
						Combin	
13 [Do you expect an increase or decrease within the year after you file this form	.2				monthly	income
_	No.	••					

Official Form 106l Schedule I: Your Income page 2

Yes. Explain:

Fill	in this informa	ation to identify yo	our case:					
Deb	tor 1	Channel Ren	ne Chanc	e		Check	t if this is:	
Deh	tor 2					_	An amended filing	ving postpetition chapter
	ouse, if filing)							the following date:
Unit	ed States Bankı	ruptcy Court for the	: MIDDL	E DISTRICT OF NORTH (CAROLINA		MM / DD / YYYY	
	e number nown)							
Of	fficial Fo	rm 106J				•		
Sc	chedule	J: Your	Exper	nses				12/15
Be info nur	as complete ormation. If m mber (if know	and accurate as nore space is ne n). Answer eve	s possible eded, atta ry questio	. If two married people and the control of the cont				
Par 1.	t 1: Desci	ribe Your House nt case?	hold					
	■ No. Go to							
	☐ Yes. Doe	es Debtor 2 live	in a separ	ate household?				
	□N	-						
	ПΥ	es. Debtor 2 mus	st file Offic	ial Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Debto	or 2.	
2.	Do you hav	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state				Son - SSI inco	me		■ No
	dependents	names.			included			□ Yes □ No
								☐ Yes
								□ No
								☐ Yes
								□ No
3.	Do vour ext	penses include		1	-			☐ Yes
٥.	expenses o	f people other t d your depende	han $_{\square}$	No Yes				
	<u> </u>							
Par Est		nate Your Ongoi		ly Expenses uptcy filing date unless y	ou are using this f	orm as a sun	nlement in a Cha	nter 13 case to report
exp		a date after the		y is filed. If this is a supp				
				government assistance				
	value of sucl ficial Form 10		d have inc	cluded it on Schedule I:	Your Income		Your expe	enses
(,						
4.		or home owners and any rent for th		ses for your residence. I or lot.	nclude first mortgag	e 4. \$		268.00
	If not includ	ded in line 4:						
	4a. Real e	estate taxes				4a. \$		0.00
		erty, homeowner's	s, or renter	's insurance		4b. \$		24.00
				upkeep expenses		4c. \$		0.00
F		eowner's associa			ma aguitu la ara	4d. \$		0.00
5.	Additional i	mortgage paym	ents for yo	our residence, such as ho	ine equity loans	5. \$		0.00

Deb	tor 1	Channel Rene Chance	Case num	nber (if known	n)
6.	Utiliti	ios:			
0.	6a.	Electricity, heat, natural gas	6a.	\$	100.00
	6b.	Water, sewer, garbage collection	6b.		40.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	· -	0.00
	6d.	Other Specific Call Phone	6d.		60.00
		Cable Cell Priorie	_	\$	62.00
		Internet		\$	65.00
		Home Phone		\$	40.00
7.	Food	and housekeeping supplies		\$	385.00
8.		Icare and children's education costs	8.		0.00
9.		ning, laundry, and dry cleaning		\$	85.00
10.		onal care products and services	10.		43.00
11.		cal and dental expenses	11.	· -	56.00
12.		sportation. Include gas, maintenance, bus or train fare.		·	
		ot include car payments.	12.	\$	193.00
13.		rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	55.00
14.	Char	itable contributions and religious donations	14.	\$	20.00
15.	Insur	rance.			
		ot include insurance deducted from your pay or included in lines 4 or 20.			
		Life insurance	15a.		0.00
	15b.	Health insurance	15b.		0.00
	15c.	Vehicle insurance	15c.	\$	120.00
	15d.	Other insurance. Specify:	15d.	\$	0.00
16.		s. Do not include taxes deducted from your pay or included in lines 4 or 20.			
		Personal Property Taxes	16.	\$	16.00
17.		Ilment or lease payments:			
		Car payments for Vehicle 1	17a.	· —	0.00
		Car payments for Vehicle 2	17b.		0.00
		Other. Specify:	17c.		0.00
		Other. Specify:	17d.	\$	0.00
18.		payments of alimony, maintenance, and support that you did not report as	10	¢	0.00
40		cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	· ·	
19.		r payments you make to support others who do not live with you.	40	\$	0.00
20	Spec	ny. r real property expenses not included in lines 4 or 5 of this form or on <i>Sch</i> e	19.	our Income	
20.		Mortgages on other property	20a.		0.00
		Real estate taxes	20b.		0.00
		Property, homeowner's, or renter's insurance	20c.		0.00
		Maintenance, repair, and upkeep expenses	20d.		
			20d. 20e.		0.00
0.4		Homeowner's association or condominium dues		·	0.00
21.		r: Specify: Chapter 13 Plan Payment	21.	+\$	293.00
	Gym	Membership		+\$	27.00
22.	Calc	ulate your monthly expenses			
	22a.	Add lines 4 through 21.		\$	1,952.00
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	7-1-1-
		Add line 22a and 22b. The result is your monthly expenses.		\$	1,952.00
	220. /	The result by your morning expenses.		Ψ	1,332.00
23.		ulate your monthly net income.			
		Copy line 12 (your combined monthly income) from Schedule I.	23a.	· —	1,952.00
	23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	1,952.00
	23c.	Subtract your monthly expenses from your monthly income.	220	\$	0.00
		The result is your monthly net income.	23c.	Ψ	5.50
24.	Do v	ou expect an increase or decrease in your expenses within the year after yo	u file this	s form?	
۲٠.		cample, do you expect to finish paying for your car loan within the year or do you expect your			ncrease or decrease because of a
		cation to the terms of your mortgage?	3-3-		
	■ No	0.			
	□ Ye	es. Explain here:			
		<u> </u>			

UNITED STATES BANKRUPTCY COURT FOR THE MIDDLE DISTRICT OF NORTH CAROLINA DURHAM DIVISION

In Re: Channel Rene Chance	Case No
Social Security No.: xxx-xx-3757	Chapter 13

Address: 1914 Jersey Avenue, Apt 5, Durham, NC 27707

Debtor.

Below Median Income Disposable Income Calculation								
CMI Income (Before Marital Adjustment) (Form 22C-1, line 11)	\$ 338.00	Schedule I Income Minus Schedule I Expenses (Sch. I, line 12)	\$ 1,952.00					
<u>Minus</u>		(Sch. 1, line 12)						
Child Support received (1st column) (Sch. I, line 8c)	0.00							
Child Support received (2 nd column) (Sch. I, line 8c)	0.00							
Schedule I expenses (1st column)(Sch. I, line 6)	0.00							
Schedule I expenses (2 nd column)(Sch. I, line 6)	0.00							
Schedule J expenses (Including proposed plan payment) (Sch. J, line 23b)	1,952.00	Schedule J expenses	1.072.00					
Difference between plan payment averaged over 36 months and actual plan payment	192.00	(Including proposed plan payment) (Sch. J, line 23b)	1,952.00					
Equals Means Test Derived Disposable Income:	\$ -1,806.00	Equals Actual Disposable Income: (Sch. J, line 23c)	\$ 0.00					

(edocs2 rev. 1/13/20)

Fill in this inform	ation to identify your	case:				
Debtor 1	Channel Rene Ch	ance				
	First Name	Middle Name	Last	Name		
Debtor 2	- <u>-</u>					
(Spouse if, filing)	First Name	Middle Name	Last	t Name		
United States Ban	kruptcy Court for the:	MIDDLE DISTRICT OF	NORTH CA	ROLINA		
Case number						
(if known)						☐ Check if this is an
						amended filing
Official Form Declarati		n Individual	Debto	or's Sche	dules	12/15
obtaining money o years, or both. 18		connection with a bank				tement, concealing property, or 100, or imprisonment for up to 20
Did you pay	or agree to pay some	one who is NOT an attor	rney to help	you fill out bankru	ptcy forms?	
■ No						
☐ Yes. Na	ame of person					nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
	y of perjury, I declare true and correct.	that I have read the sum	mary and s	chedules filed with	this declarat	ion and
X /s/ Chan	nel Rene Chance		Х			
	I Rene Chance			Signature of Debto	r 2	
Signature	of Debtor 1					
Date Ju	une 10, 2020			Date		

Debtor		Channel Rene Ch	ance			
		First Name	Middle Name	Last Name		
Debtor : (Spouse if	_	First Name	Middle Name	Last Name		
United S	States Bank	cruptcy Court for the:	MIDDLE DISTRICT OF NORTH	CAROLINA		
Case nu (if known)					☐ Check if this is an amended filing	
State Be as conforma	omplete an tion. If mo	of Financial A	le. If two married people are fili	s Filing for Bankruptcy ng together, both are equally respons orm. On the top of any additional page	ible for supplying correct	4/1 e
Dort 1.	Give De	tails About Your Mar	ital Status and Where You Lived	Before		
Part I:						
Part 1:	nat is your o	current marital status	?			
	nat is your o	current marital status	?			
l. Wh	Married Not marrie	ed		vou live nou?		
. Wh	Married Not marrie ring the las No Yes. List a	ed at 3 years, have you l i all of the places you liv	ved anywhere other than where red in the last 3 years. Do not included	de where you live now.		
. Wh	Married Not marrie ring the las No Yes. List a	ed st 3 years, have you li	ved anywhere other than where		Dates Debtor lived there	2
De Du	Married Not marrie ring the las No Yes. List a	ed st 3 years, have you lively all of the places you lively address: scue Mission St	ved anywhere other than where red in the last 3 years. Do not inclu Dates Debtor 1	de where you live now.		
Dee Du	Married Not marrie ring the las No Yes. List a ebtor 1 Prio urham Res 7 E Knox urham, NC	ed at 3 years, have you lively all of the places you lively address: scue Mission St 2 27701 lence Road	red in the last 3 years. Do not inclu Dates Debtor 1 lived there From-To:	Debtor 2 Prior Address:	lived there ☐ Same as De	otor 1

Official Form 107

Debtor	1 Channel Rene Chance		Case	e number (if known)	
Part 2	Explain the Sources of You	ır Income			
Fill	I you have any income from er in the total amount of income yo ou are filing a joint case and you	ou received from all jobs and a	all businesses, including part-	time activities.	ndar years?
_	NI.				
	No				
	Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	anuary 1 of current year until e you filed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
	t calendar year: ry 1 to December 31, 2019)	■ Wages, commissions, bonuses, tips	\$608.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
	calendar year before that: ry 1 to December 31, 2018)	■ Wages, commissions, bonuses, tips	\$13,000.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
win	d other public benefit payments; inings. If you are filing a joint cas t each source and the gross inco	e and you have income that y	you received together, list it o	nly once under Debtor 1.	
	Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
	anuary 1 of current year until e you filed for bankruptcy:	Child Support	\$2,028.00		
		Social Security	\$9,000.00		
		Food Stamps	\$96.00		
	t calendar year: ry 1 to December 31, 2019)	Child Support	\$4,056.00		
		Social Security	\$18,000.00		
		Food Stamps	\$180.00		
	calendar year before that: ry 1 to December 31, 2018)	Child Support	\$4,056.00		

De	btor 1 C	hannel Re	ne Chance		Ca	ase number (<i>if known</i>)		
			5.14			5.17		
			Debtor	1 s of income	Gross income from	Debtor 2 Sources of inc	nomo	Gross income
						Describe below		
			Describe	e below.	each source		7.	(before deductions
					(before deductions and			and exclusions)
					exclusions)			
			Social	Security	\$9,000.00)		
			Food S	Stamps	\$2,364.00)		
Pa	rt 3: Lis	st Certain Pa	ayments You Made Be	efore You Filed for	Bankruntcy			
2								
э.	_		s or Debtor 2's debts			h ((0)
	☐ No.				imer debts. Consumer de	bits are defined in 11	U.S.C. § 101	(8) as "incurred by an
		individuai	primarily for a personal	, ramily, or nouseno	a purpose."			
		During the	90 days before you file	ad for hankruntov di	d you pay any creditor a to	otal of \$6.825* or mo	ro?	
		□ No.	Go to line 7.	sa for bankruptoy, ar	a you pay arry creditor a te	λαι οι ψο,ο25 οι πιο	, i C :	
		☐ Yes			d a total of \$6,825* or mor			
			not include payments		its for domestic support ob	oligations, such as cl	niid support an	d allmony. Also, do
		* Subject			s after that for cases filed o	on or after the date of	of adjustment.	
							•	
	■ Yes		or Debtor 2 or both ha				_	
		During the	e 90 days before you file	ed for bankruptcy, di	d you pay any creditor a to	otal of \$600 or more	?	
		■ No.	Go to line 7.					
		☐ Yes		9	-l - (-t-l - (Φ000 - · · · · · · · · ·	and the state to account		and Plan Daniel
		□ Yes			d a total of \$600 or more a bligations, such as child su			
			attorney for this bank		ongations, such as chila st	apport and amnony.	A130, 40 Hot III	cidde payments to an
				., .,				
	Cuadita	ula Nama am	d Address	Dates of navimo	nt Total amount	A marint war	Was this no	numant fau
	Credito	r's Name an	a Address	Dates of payme	nt Total amount paid	Amount you still owe	was this pa	ayment for
					paid	Still OWC		
7.					a payment on a debt you			
	Insiders	include your	relatives; any general p	artners; relatives of	any general partners; part	nerships of which yo	ou are a genera	al partner; corporations
					of 20% or more of their voti			
			te as a sole proprietor.	11 U.S.C. § 101. Inc	lude payments for domest	ic support obligation	ıs, such as chi	ld support and
	alimony.							
	■ NI-							
	■ No	1.2-4 - 11						
			ments to an insider.					
	Insider'	's Name and	Address	Dates of payme		Amount you	Reason for	this payment
					paid	still owe		
В.	Within 1	year before	you filed for bankrup	tcy, did you make a	any payments or transfer	any property on a	ccount of a d	ebt that benefited an
	insider?	, -						
	Include p	payments on	debts guaranteed or co	signed by an insider	:			
	_							
	■ No							
	☐ Yes	s. List all payı	ments to an insider					
	Insider'	's Name and	Address	Dates of payme	nt Total amount	Amount you		this payment
					paid	still owe	Include cred	litor's name

Der	Channel Rene Chance		Case numb	Der (if known)	
Par	t 4: Identify Legal Actions, Repossession	s, and Foreclosures			
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.				
	■ No □ Yes. Fill in the details.				
	Case title Case number	Nature of the case	Court or agency	Status of the	case
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below		erty repossessed, foreclos	sed, garnished, attached,	seized, or levied?
	□ No. Go to line 11.■ Yes. Fill in the information below.				
	Creditor Name and Address	Describe the Property		Date	Value of the property
		Explain what happened	d		
	Home Credit 2005 N. Pointe Drive	2013 Honda Civic		06/09/2020	\$6,000.00
	Suite A-11 Durham, NC 27705	Property was reposse			
	Durnam, NC 27705	☐ Property was foreclos ☐ Property was garnish			
		☐ Property was attache			
	Yes. Fill in the details. Creditor Name and Address	Describe the action the	e creditor took	Date action was taken	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or at No Yes		erty in the possession of a	n assignee for the benef	it of creditors, a
Par	t 5: List Certain Gifts and Contributions				
13.	Within 2 years before you filed for bankrup No Yes. Fill in the details for each gift.	tcy, did you give any gift	s with a total value of mor	e than \$600 per person?	
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankrup		s or contributions with a t	otal value of more than \$	600 to any charity?
	Gifts or contributions to charities that total		u contributed	Dates you	Value
	more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)			contributed	
	Union Baptist Church 904 N Roxboro St Durham, NC 27701	Tithes and offer	ings	2018 - 2020	\$800.00

Deb	tor 1	Channel Rene Chance		Case number (if known)				
Part	t 6:	List Certain Losses						
		n 1 year before you filed for bankru mbling?	ptcy or	since you filed for bankruptcy, did y	ou lose anyt	hing because of thef	t, fire, other disaster,	
	_ '	No /es. Fill in the details.						
		ribe the property you lost and the loss occurred	Include	ibe any insurance coverage for the lo e the amount that insurance has paid. Li nce claims on line 33 of Schedule A/B: I	ist pending	Date of your loss	Value of property lost	
Part	t 7:	List Certain Payments or Transfers	3					
	Includ	ulted about seeking bankruptcy or p	orepari	id you or anyone else acting on your ng a bankruptcy petition? s, or credit counseling agencies for serv			rty to anyone you	
	Perso Addr Emai	on Who Was Paid	ou ou	Description and value of any prope transferred	erty	Date payment or transfer was made	Amount of payment	
	promi		litors o	id you or anyone else acting on your or to make payments to your creditors ted on line 16.		r transfer any prope	rty to anyone who	
	_ '	No ⁄es. Fill in the details.						
	Perse Addr	on Who Was Paid ess		Description and value of any prope transferred	erty	Date payment or transfer was made	Amount of payment	
	transf Includ includ	ferred in the ordinary course of you	r busir made	as security (such as the granting of a se				
	Addr			Description and value of property transferred	Describe a payments paid in exc	any property or received or debts change	Date transfer was made	
		on's relationship to you						
	benef	n 10 years before you filed for bank iciary? (These are often called asset No Yes. Fill in the details.		, did you transfer any property to a se ion devices.)	elf-settled tru	ıst or similar device	of which you are a	
		e of trust		Description and value of the prope	erty transferre	ed	Date Transfer was	
							made	

Debtor 1 Channel Rene Chance

Case number (if known)

Pai	List of Certain Financial Accounts, Inst	ruments, Safe Deposit i	soxes, and S	torage Unit	S			
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.							
	No Silvi di Livi							
	Yes. Fill in the details.							
		_	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 yearsh, or other valuables?	ear before you filed for b	oankruptcy, a	ıny safe de _l	oosit box or other depos	sitory for securities,		
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, Strate and ZIP Code)		Describe	the contents	Do you still have it?		
22.	Have you stored property in a storage unit or	place other than your h	nome within	1 year befor	e you filed for bankrupt	cy?		
	□ No■ Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	to it?	to it? Address (Number, Street, City,		the contents	Do you still have it?		
	StoreSmart Self-Storage 1651 TW Alexander Dr Durham, NC 27703	Debtor only		Furnitur belongir	e and personal ags	■ No □ Yes		
Pai	t 9: Identify Property You Hold or Control fo	or Someone Else						
23.	Do you hold or control any property that som for someone.	neone else owns? Includ	de any prope	rty you bor	rowed from, are storing	for, or hold in trust		
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prope (Number, Street, City, Sta Code)		Describe	the property	Value		
Pai	t 10: Give Details About Environmental Infor	rmation						
For	the purpose of Part 10, the following definition	ns apply:						
	Environmental law means any federal, state,	or local statute or regul	ation concer	ning polluti	on, contamination, relea	ases of hazardous or		

- toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

		_	_		
Debtor 1	Chai	าทอไ	Pana	Cha	nco

Case number (if known)

24.	4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?					
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and	Environmental law, if you know it	Date of notice		
	, , , , , , , , , , , , , , , , , , ,	ZIP Code)				
25.	Have you notified any governmental unit of a	ny release of hazardous material?				
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or adm	inistrative proceeding under any envi	ronmental law? Include settlements a	and orders.		
	■ No □ Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case		
Par	11: Give Details About Your Business or C	,				
27.	Within 4 years before you filed for bankrupto	y, did you own a business or have an	y of the following connections to any	business?		
	■ A sole proprietor or self-employed in	a trade, profession, or other activity,	either full-time or part-time			
	☐ A member of a limited liability compa	ny (LLC) or limited liability partnershi	p (LLP)			
	☐ A partner in a partnership					
	☐ An officer, director, or managing exe	cutive of a corporation				
	☐ An owner of at least 5% of the voting	or equity securities of a corporation				
	☐ No. None of the above applies. Go to Pa	art 12.				
	Yes. Check all that apply above and fill i	n the details below for each business				
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security			
		Name of accountant or bookkeeper	Dates business existed			
	Chance Services	Personal services	EIN:			
	1914 Jersey Ave., Apt 5 Durham, NC 27707	n/a	From-To 2005 - Present			
	Within 2 years before you filed for bankrupto institutions, creditors, or other parties.	y, did you give a financial statement t	o anyone about your business? Inclu	ıde all financial		
	■ No					
	Yes. Fill in the details below.					
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued				
	, , , , ,					

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Debtor 1 Channel Rene Chance	Case	e number (if known)
Part 12: Sign Below		
are true and correct. I understand that	ement of Financial Affairs and any attachments, and I de at making a false statement, concealing property, or ob- fines up to \$250,000, or imprisonment for up to 20 year 1.	taining money or property by fraud in connection
/s/ Channel Rene Chance		
Channel Rene Chance Signature of Debtor 1	Signature of Debtor 2	
Date June 10, 2020	Date	
Did you attach additional pages to Yo ■ No □ Yes	our Statement of Financial Affairs for Individuals Filing	for Bankruptcy (Official Form 107)?
Did you pay or agree to pay someone ■ No	who is not an attorney to help you fill out bankruptcy	forms?
☐ Yes. Name of Person . Attach	the Bankruptcy Petition Preparer's Notice, Declaration, an	nd Signature (Official Form 119).

Fill in this information to identify your case:					
Debtor 1	Channel Rene Chance				
Debtor 2 (Spouse, if filing)					
United States B	Bankruptcy Court for the: Middle District of North Carolina				
Case number (if known)					

Check	Check as directed in lines 17 and 21:							
	According to the calculations required by this Statement:							
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).							
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).							
	3. The commitment period is 3 years.							
	4. The commitment period is 5 years.							

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

04/20

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

I	Part	1: Calculate Your Average Monthly Income							
Ī	1.	What is your marital and filing status? Check one of	only.						
		■ Not married. Fill out Column A, lines 2-11.							
		☐ Married. Fill out both Columns A and B, lines 2-11.							
	10 th	Il in the average monthly income that you received from al 1(10A). For example, if you are filing on September 15, the 6- e 6 months, add the income for all 6 months and divide the tota ouses own the same rental property, put the income from that	month per al by 6. Fil	iod would I in the re	l be March 1 throu sult. Do not includ	ıgh Augu le any in	ist 31. If the amo	ount of your monthly incom ore than once. For examp	ne varied during le, if both
						Colum Debto		Column B Debtor 2 or non-filing spouse	
	2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and co	mmissi	ons (before all	\$	0.00	\$	
	3.	Alimony and maintenance payments. Do not include Column B is filled in.	e payme	nts from	a spouse if	\$	338.00	\$	
	4.	All amounts from any source which are regularly p of you or your dependents, including child suppor from an unmarried partner, members of your househo and roommates. Do not include payments from a spot you listed on line 3.	t. Include ld, your o	e regulai depende	r contributions nts, parents,	\$	0.00	\$	
	5.	Net income from operating a business, profession, or farm	Debtor	1					
		Gross receipts (before all deductions)	\$	0.00					
		Ordinary and necessary operating expenses	- \$	0.00					
		Net monthly income from a business, profession, or fa	ırm \$	0.00	Copy here ->	\$	0.00	\$	
	6.	Net income from rental and other real property	Debtor						
		Gross receipts (before all deductions)	\$_	0.00					
		Ordinary and necessary operating expenses	- \$	0.00		•	0.00	•	
ı		Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Debtor 1	Channel Rene Chance		Case number	(if knowi	n)		
			Column A Debtor 1		Column B Debtor 2 c		
7. Int	erest, dividends, and royalties		\$	0.00) \$ 		
8. U n	nemployment compensation		\$	0.00	<u> </u>		
	not enter the amount if you contend that the amount received was a bene e Social Security Act. Instead, list it here:	fit under					
		.00					
-	For your spouse\$						
bei not Un dis pay doc	ension or retirement income. Do not include any amount received that was nefit under the Social Security Act. Also, except as stated in the next sente trinclude any compensation, pension, pay, annuity, or allowance paid by the lited States Government in connection with a disability, combat-related injustability, or death of a member of the uniformed services. If you received any paid under chapter 61 of title 10, then include that pay only to the extentives not exceed the amount of retired pay to which you would otherwise be entired under any provision of title 10 other than chapter 61 of that title.	ence, do e ry or y retired that it	\$	0.00	D\$		
Do und col crii col Go dea	come from all other sources not listed above. Specify the source and are not include any benefits received under the Social Security Act; payments der the Federal law relating to the national emergency declared by the Preder the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to ronavirus disease 2019 (COVID-19); payments received as a victim of a wine, a crime against humanity, or international or domestic terrorism; or impensation, pension, pay, annuity, or allowance paid by the United States overnment in connection with a disability, combat-related injury or disability ath of a member of the uniformed services. If necessary, list other sources parate page and put the total below.	s made sident the ar					
			\$	0.00	\$		
			\$	0.00) \$		
	Total amounts from separate pages, if any.		\$	0.00) \$		
	alculate your total average monthly income. Add lines 2 through 10 for ch column. Then add the total for Column A to the total for Column B.	\$	338.00	+ \$			338.00
art 2:	Determine How to Measure Your Deductions from Income					mor	nthly income
12. Co	ppy your total average monthly income from line 11.					\$	338.00
	Ilculate the marital adjustment. Check one:					·	
	You are not married. Fill in 0 below.						
	You are married and your spouse is filing with you. Fill in 0 below.						
	Fill in the amount of the income listed in line 11, Column B, that was NO dependents, such as payment of the spouse's tax liability or the spouse's Below, specify the basis for excluding this income and the amount of inc	s suppor	t of someone	e other	than you or you	ır depende	nts.
	adjustments on a separate page.	Jino act	2.00 10 00011	. paipo		, not doubt	
	If this adjustment does not apply, enter 0 below.						
		. \$		_			
		· • —		_			
		+\$					
	Total	\$	0.00		Copy here=>		0.00
14. Y	our current monthly income. Subtract line 13 from line 12.					\$	338.00
	Calculate your current monthly income for the year. Follow these steps						220.00
1:	5a. Copy line 14 here=>					\$	338.00

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Debtor 1	Channel Rene Chance	Case number (if known)	
	Multiply line 15a by 12 (the number of months in a year).	x 1	12
15	b. The result is your current monthly income for the year for this pa	rt of the form\$	4,056.00

Case number (if known)

16. Calculate the median family income that applies to you. Follow these steps: 16a. Fill in the state in which you live. 2 16b. Fill in the number of people in your household. 62.050.00 16c. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). 17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) 18. Copy your total average monthly income from line 11. \$ 338.00 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. 0.00 19a. If the marital adjustment does not apply, fill in 0 on line 19a. 338.00 \$ 19b. Subtract line 19a from line 18. 20. Calculate your current monthly income for the year. Follow these steps: 338.00 20a. Copy line 19b Multiply by 12 (the number of months in a year). x 12 4,056.00 20b. The result is your current monthly income for the year for this part of the form 62,050.00 20c. Copy the median family income for your state and size of household from line 16c 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4. Part 4: Sign Below By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct. X /s/ Channel Rene Chance **Channel Rene Chance** Signature of Debtor 1 Date June 10, 2020 MM / DD / YYYY If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Debtor 1

Channel Rene Chance

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
_	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

United States Bankruptcy Court Middle District of North Carolina

In re	Channel Rene Chance	Case No.	
	Debtor(s)	Chapter	13
	DISCLOSURE OF COMPENSATION OF ATTOR	RNEY FOR DE	EBTOR(S)
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorned compensation paid to me within one year before the filing of the petition in bankruptcy, be rendered on behalf of the debtor(s) in contemplation of or in connection with the bank	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept	\$	4,500.00
	Prior to the filing of this statement I have received	\$	0.00
	Balance Due		4,500.00
2.	\$ of the filing fee has been paid.		
3.	The source of the compensation paid to me was:		
	■ Debtor □ Other (specify):		
4.	The source of compensation to be paid to me is:		
	■ Debtor □ Other (specify):		
5.	■ I have not agreed to share the above-disclosed compensation with any other person u	unless they are mem	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with a person or persons w copy of the agreement, together with a list of the names of the people sharing in the		
6.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects	s of the bankruptcy c	ase, including:
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in dete b. Preparation and filing of any petition, schedules, statement of affairs and plan which c. Representation of the debtor at the meeting of creditors and confirmation hearing, and d. [Other provisions as needed] Exemption planning, Means Test planning, and other items if specior required by Bankruptcy Court local rule. May include fee paid to meeting. 	may be required; d any adjourned hear	rings thereof;
7.	By agreement with the debtor(s), the above-disclosed fee does not include the following Representation of the debtors in any dischargeability actions, relies proceeding, and any other items excluded in attorney/client fee corrule.	f from stay action	

Fee also collected, where applicable, include such things as: Pacer access: \$10 per case, Credit Reports: \$10 each, Judgment Search: \$10 each, Credit Counseling Certification: Usually \$15 per client, Financial Management Class Certification: Usually \$15 per client, Use of computers for Credit Counseling briefing or Financial Management Class: \$10 per session, or paralegal typing assistance regarding credit counseling briefing: \$75 per

session.

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In re	Channel Rene Chance	Case No.	
	Debtor(s)		

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)						
	CERTIFICATION Ing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in Ist Koury Hicks					
I certify that the foregoing is a complete stateme this bankruptcy proceeding.						
June 10, 2020	/s/ Koury Hicks					
Date	Koury Hicks					
	Signature of Attorney					
	The Law Offices of John T. Orcutt, PC					
	6616-203 Six Forks Road					
	Raleigh, NC 27615					
	919-286-1695 Fax: 919-286-2704					
	khicks@johnorcutt.com					
	Name of law firm					

United States Bankruptcy CourtMiddle District of North Carolina

		made District of Forth Curon					
In re	Channel Rene Chance		Case No.				
		Debtor(s)	Chapter	13			
			•				
AMEDICA MICAL OF ODEDITIOD ANAMOUS							
VERIFICATION OF CREDITOR MATRIX							
The ab	ove-named Debtor hereby verifies that	t the attached list of creditors is true and	correct to the best	of his/her knowledge.			
Date:	June 10, 2020	/s/ Channel Rene Chance					
		Channel Rene Chance					
		Signature of Debtor					

AmeriFinancial Solutions, LLC ****
Post Office Box 65018
Baltimore, MD 21264-5018

AT&T **
Wireless Correspondence
Post Office Box 10330
Fort Wayne, IN 46851-0330

Consumer Cellular 12447 SW 69th Avenue Portland, OR 97223-8517

Credit Bureau Assoc. 102 Sailors Drive Ellijay, GA 30540

Durham County EMS PO Bo 600116 Raleigh, NC 27675

Durham County Tax Collector P.O.Box 3397 Durham, NC 27702

E-Recovery Solutions 1650 Cambria Street, NE Christiansburg, VA 24073

Hertz Rental Post Office Box 26120 Oklahoma City, OK 73126

Holiday Inn Club Vacations Attn: Officer 8505 W. Irlo Bronson Memorial Hwy Kissimmee, FL 34747-8201

Holiday Inn Club Vacations Attn: Officer 8505 W. Irlo Bronson Memorial Hwy Kissimmee, FL 34747-8201 Home Credit ATTN: Officer 2005 N. Pointe Drive Suite A-11 Durham, NC 27705

Internal Revenue Service (MD) **
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Philadelphia, PA 19101-7346

Kimbrell's of North Carolina, Inc. ATTN: Officer 101 W Chapel Hill Street Durham, NC 27701

Law Offices of John T. Orcutt 6616-203 Six Forks Road Raleigh, NC 27615

NC Child Support Enforcement (**) Bankruptcy Reporting Contact Post Office Box 20800 Raleigh, NC 27619-0800

NC Department of Justice for NC Department of Revenue Post Office Box 629 Raleigh, NC 27602-0629

Nelnet *** Education Planning & Financing Post Office Box 82561 Lincoln, NE 68501-2561

North Carolina Dept. of Revenue** Post Office Box 1168 Raleigh, NC 27602-1168

Professional Credit Service 400 International Way Springfield, OR 97477

Sprint**
Attn Bankruptcy Dept
6200 Sprint Parkway
Overland Park, KS 66251

State Employees' Credit Union****
Attn: Officer
Post Office Box 28540
Raleigh, NC 27611-8540

StoreSmart Self-Storage 1651 TW Alexander Dr Durham, NC 27703

T-Mobile***
Customer Relations
Post Office Box 37380
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